## 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000133125

**Entity Name: PONCE DENTAL CORPORATION** 

FILED Apr 20, 2010 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

3190 PONCE DE LEON BLVD. CORAL GABLES, FL 33134

Current Mailing Address: New Mailing Address:

3190 PONCE DE LEON BLVD. CORAL GABLES, FL 33134

FEI Number: 26-1677775 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CRUZ, ALINA
782 NW LEJEUNE ROAD
7891 W FLAGLER ST
SUITE 439
MIAMI, FL 33126 US

CRUZ, FELIX
7891 W FLAGLER ST
SUITE 418
MIAMI, FL 33144-230 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: FELIX D. CRUZ 04/20/2010

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Title:

Name: LOPEZ, MANUEL G DDS
Address: 3190 PONCE DE LEON BLVD.
City-St-Zip: CORAL GABLES, FL 33134

Title: [

 Name:
 LOPEZ, PATRICIA C

 Address:
 3190 PONCE DE LEON BLVD.

 City-St-Zip:
 CORAL GABLES, FL 33134

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: PATRICIA CRUZ-LOPEZ D 04/20/2010